CITY OF DEARY - REQUEST FOR PUBLIC RECORDS

The City of Deary complies with the Idaho Public Records Act (Idaho Code Title 74, Chapter 1) regarding appropriate time limitations for public records requests. By law, information gained through this request cannot be used for the purpose of compiling a mailing list or telephone list without obtaining permissions from each individual.

REQUESTER'S INFORMATION (please print):

Full Name: _		Date of Request:
Mailing	Address:	
City:		State: Zip:
Email Addres	ss:	Phone Number:

REQUESTED DOCUMENTS. Please be as specific as possible with dates, property addresses and details regarding the information you wish to receive.

PLEASE NOTE: Depending upon the time and amount of copies requested, an advance payment of a fee may be required. When it is estimated that more than two (2) hours of labor or more than 100 copies of paper records will be necessary to complete the request, the advance fee will be required prior to fulfilling the request.

 \Box I would like to personally examine these records. The City will call with appointment options when records have been compiled and are ready for review.

□ I would like copies of records provided to me in electronic form, if available.

□ I would like copies of records provided to me in printed form.

I acknowledge, with my signature below, that the records sought by this request will be utilized only for purposes allowed by law and noted above. Further, I agree to pay any associated fees as noted above, including mailing if applicable.

Signature: Date:

FOR CITY USE ONLY:

Date received by Clerk: _____

Status	of Request:	[]	Approved letter sent:	[] Denied letter sent:	
[]	More than thr	ee v	vorki	ing days are needed to	locate or retrieve	the requested records. A re	esponse

shall be provided within ten (10) working days of the request. Letter sent: _____

Response sent via:
Email USPS Pickup #_____ pages Fee Collected: ______

City Clerk Reviewed (*signature*):